

☐ CPER ☐ PPER

State of Nevada - Special Pay / Time Adjustment Sheet

Agency



(B/A)
Home O

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Agency
Name

****For Central Payroll Use Only****

Approved
(Initials)

□

[illegible]

Prepared By

Date _____

Approved By

Date _____

Telephone Number

Entered (Initials)

Date

	/	/
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Signature

Date _____

This is to be signed when paying leave balances for terminating employees to certify that all leave taken has been reported and the employee is entitled to payment of the balance(s).